Board of Pharmacy

Ohio Automated Rx Reporting System

Ohio Automated Rx Reporting System (OARRS) E-Newsletter - Winter 2025

A Message from our Executive Director

Dear OARRS User,

The Ohio Automated Rx Reporting System (OARRS) is a critical tool for promoting safe prescribing and preventing misuse of controlled substances. Improper use of OARRS can carry serious consequences including loss of OARRS access, discipline from the professional licensing boards, and civil or criminal penalties. As an OARRS user, it is essential to understand what qualifies as acceptable – and unacceptable – use.

Acceptable Uses:

- Reviewing a patient's controlled substance history before prescribing or dispensing.
- Monitoring ongoing treatment for patients receiving controlled substances.
- Evaluating potential misuse, diversion, doctor shopping, or unsafe prescribing patterns.
- Clinical decision-making directly related to a patient under your care.
- Delegated use by an authorized delegate acting on behalf of a licensed prescriber or pharmacist, within the scope of their role.
- Investigation by law enforcement for an active drug abuse offense as defined in section 2925.01 of the Ohio Revised Code.

Prohibited Uses:

- Looking up yourself, a coworker, family member, neighbor, or anyone NOT under your clinical care.
- Using OARRS for curiosity, personal reasons, or non-clinical evaluations.
- Sharing OARRS information with individuals not directly involved in the patient's care.

A prescriber or pharmacist may review a patient's OARRS report with the patient; however, they are not permitted to give the patient a copy of their report. Patients must request a copy of their OARRS report directly from the Board of Pharmacy.

Direct patient care would include the decision-making process of determining the appropriate prescribing or dispensing of controlled substances. Using OARRS for use in prior authorization determination is not an acceptable use. Prescribers and pharmacists who are employed by a managed care organization are not permitted to utilize OARRS information as processes such as claim determination are not considered an act of direct patient care.

Additionally, a provider should never provide a copy of an OARRS report to anyone, including the insurance company, as a means of documentation for claim determination. The Acceptable Use Policy specifically states, "I will not provide a copy of the OARRS report to anyone else, including the patient." Providing a copy of an OARRS report to another person is a violation of the Acceptable Use Policy agreement and may result in suspension or termination of the user's

OARRS account, and criminal and/or civil penalties pursuant to ORC **4729.86**.

For more information on OARRS acceptable use see **Ohio Revised Code 4729.80** or visit the **OARRS webpage** to review the Acceptable Use Policies. Questions can be directed to **support@pharmacy.ohio.gov**.

Thank you for all that you do to keep Ohioans safe and healthy.

Sincerely,

Steven W. Schierholt
Executive Director
Ohio Board of Pharmacy

People call, text, and chat the 988 Lifeline to talk about a lot of emotional needs—not just thoughts of suicide. Whatever your reason, the #988Lifeline is there to help. There is hope.

OARRS Updates

OARRS vs. Electronic Medical Records (EMR)

OARRS has been made aware that some practitioners may be confusing medication lists within the EMR as the patient's OARRS report. Most health systems and pharmacies have integrated OARRS into their EMR which allows for quick and convenient access to a patient's OARRS report without having to navigate multiple systems.

Some things to look for in an OARRS report would include the NarxCare score, Overdose Risk Score, history of Non-Fatal Overdose, and State Indicators. An OARRS report will include all dispenses of reportable medications as they are submitted by Ohio licensed dispensers, a list of all the prescribers and their contact information, and a list of all pharmacies and their contact information.

It is important to be certain that patient OARRS reports are reviewed, at a minimum, as often as required by the prescriber's or pharmacist's licensing board. The EMR medication list does not satisfy those requirements. OARRS may populate differently in each electronic system so be sure to check with your employer if you are uncertain if you are seeing OARRS within the EMR.

Electronic Transmission of Dispensation Information - ASAP 5.0

Currently, Bamboo Health's PMP Clearing House (the online portal for dispensation data submission to OARRS) is not set up to receive data that is submitted via the 5.0 format. We request that test data is not submitted via the ASAP 5.0 format until the Board of Pharmacy has communicated that the system is operable.

Electronic submissions will be required to be submitted via the ASAP 5.0 standard by July 1, 2026. It is anticipated that the system should be capable of receiving ASAP 5.0 data shortly after the new year. For more information on ASAP 5.0, please click **here**.

The updated rules, which will go into effect July 1, 2026, can be found in Ohio Administrative

Codes **4729:8-3-02** and **4729:8-3-03**. The rule also permits the Board's Executive Director to authorize an additional six-month extension if a pharmacy or prescriber has made all reasonable and prudent attempts to meet the deadline.

Additional information will be coming soon. Questions can be directed to **www.pharmacy.ohio.gov/contact**.

Quantity Reporting

OARRS has noticed many dispenses of Gralise Starter Pack being submitted with the quantity of tablets dispensed. When dispensing medication kits that must be dispensed fully intact, the quantity submitted to OARRS should represent the lowest dispensable unit. Lowest dispensable unit means that a quantity of 1 should be submitted, as the pack must be dispensed in full. Submitting the quantity of tablets will cause discrepancies with the quantities actually dispensed. For example, a Gralise Starter Pack has 78 tablets. Submitting a quantity of 78 will be interpreted as dispensing 78 starter packs, which would be equivalent to 6,084 tablets.

Similarly, when reporting wholesale sales of reportable medications, the package size and the quantity of packages sold must both be reported. OARRS has noticed several instances where the quantity sold appears to represent the number of dosage units sold versus the number of packages sold. This can result in the sale of hundreds of thousands of wholesale dose units being reported to OARRS. For example, when reporting the sale of one 100 count bottle of oxycodone/acetaminophen 5/325mg, the quantity reported should = 1, meaning the wholesale dose units = 100. Reporting a quantity of 100 would indicate that 100 100-count bottles were sold, causing 10,000 wholesale dose units being reported to OARRS.

Tools to Prevent Overdose

On October 1, 2025, Governor DeWine signed executive order 2025-04D, allowing the Ohio Board of Pharmacy to expand the products listed as exempt from the definition of drug paraphernalia under Ohio law. OAC 4729-8-02 previously only included drug testing strips to test for fentanyl. The executive order allowed the Board of Pharmacy to extend the exemption to reagent kits for fentanyl and fentanyl-related compounds, and drug testing strips and reagent kits for xylazine, medetomidine, benzimidazole-opioids (also known as nitazenes), and benzodiazepine and benzodiazepine-related compounds.

These products are important tools in harm reduction efforts, allowing the presence of these compounds to be identified before consuming a drug. Ensuring that these are not classified as paraphernalia is a vital move to allow the legal possession of drug test strips and/or reagent kits to reduce the risk of overdose fatalities.

Ohio Board of Pharmacy guidance can be found on the Board of Pharmacy **website**.

The Governor's press release can be read **here**.

Additional Resources:

The Ohio Board of Pharmacy, the Office of Governor Mike DeWine, RecoveryOhio, and the Ohio Department of Behavioral Health have partnered together to offer no-cost fentanyl test strips and patient counseling brochures for Board of Pharmacy licensees. To place an order, visit: **www.pharmacy.ohio.gov/FTSorder**

The Board of Pharmacy developed a quick reference handout that can be accessed here: **www.pharmacy.ohio.gov/TestYourDrugs**

Data Quality in Prescription Monitoring Programs (CE)

The National Association of State Controlled Substance Authorities (NASCSA) has renewed the CE program for pharmacists and pharmacy technicians and analyzes the importance and value of complete, accurate data reported by dispensers to PMPs. This CE assesses the impact of intentional or non-intentional data entry errors and data omissions on patient safety. It also discusses the downstream impacts of the data reported to the PMP by a pharmacy on clinical decision-making processes and assists the pharmacy team in identifying and implementing changes in their practice setting to improve PMP data integrity. If you received credit for this CE prior to 10/20/25, this CE opportunity is available to you again to participate in and receive credit.

Visit **https://ce.talemhealth.com/a/LPMBSF**.



Ohio Board of Pharmacy
Mike DeWine, *Governor* | **Steven W. Schierholt**, *Executive Director*